## PATENT APPLICATION FEE DETERMINATION RECORD

Effective October 1, 2000

Application or Docket Number

09749212

CLAIMS AS FILED - PART I (Column 1) (Column 2)								SMALL ENTITY TYPE			OTHER THAN		
TOTAL CLAIMS							RATE	FEE	1 .	RATE	FEE		
FOR		NUMBER FILED		NUMB	ER EXTRA		BASIC FEE	355.00	OR	BASIC FEE			
TOTAL CHARGEABLE CLAIMS			27 minus 20=		•	2		X\$ 9=		OR	·X\$18=	36! ~	
INDEPENDENT CLAIMS			/ ( minus 3 =		•	8		X40=		OR	X80=	640; -	
MULTIPLE DEPENDENT CLAIM PRESENT								+135=		OR	+270=	670.	
* If the difference in column 1 is less than zero, enter "0" in column 2							TOTAL		OR	TOTAL	[386.'-		
CLAIMS AS AMENDED - PART II								IOIAL		JOR	OTHER		
10-9-0 (Column 1) (Column 2) (Column 3)								SMALL	ENTITY	OR	SMALL		
AMENDMENT A		REMAINING AFTER AMENDMENT		NUMI PREVIO PAID	BER	PRESENT EXTRA		RATE	ADDI- TIONAL FEE		RATE	ADDI/ TIONAL PEE	
	Total	20	Minus	6	72		$\ \cdot\ $	X\$ 9=	स्त्र । स्त्री व	OR	X\$18=		
	Independent	NTATION OF MI	Minus	***	CLAIM		[	X40=		OR	X80=		
	THOTTHEOL	THATION OF IM	DETIFIED DEF	CIADEIL	CLAIM		, [	+135=		OR	270=		
							L	TOTAL ADDIT, FEE		OR	TOTAL ADDIT. FEE		
(Column 1) (Column 2) (Column 3)									7.55m. 1 EE				
AMENDMENT B		CLAIMS REMAINING AFTER AMENDMENT		HIGH NUMI PREVIC PAID	BER OUSLY	PRESENT EXTRA		RATE	ADDI- TIONAL FEE		RATE	ADDI- TIONAL FEE	
NDV	Total	•	Minus	**		=	П	X\$ 9=		OR	X\$18=		
AME	Independent	NTATION OF MU	Minus	···	01.404	=	П	X40=		OR	X80=		
<u> </u>	rino i Pricoci	NTATION OF M	JLTIPLE DEP	ENDENT	CLAIM		┙┞	+135=	İ	OR	+270=		
							L	TOTAL DDIT. FEE		OR	TOTAL ADDIT, FEE		
		(Column 1)		(Colun		(Column 3)							
AMENDMENT C		CLAIMS REMAINING AFTER AMENDMENT		HIGH NUMI PREVIO PAID	BER DUSLY	PRESENT EXTRA		RATE	ADDI- TIONAL FEE		RATE	ADDI- TIONAL FEE	
	Total	•	Minus	••		2	П	X\$ 9=		OR	X\$18=		
	Independent		Minus	•••		=	11	X40=		OR	X80=		
	FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM							+135=			+270=		
	* If the entry in column 1 is less than the entry in column 2, write "0" in column 3, ** If the "Highest Number Previously Paid For" IN THIS SPACE is less than 20, enter "20."									OR	TOTAL		
•••	If the "Highest Nu	mber Previously P	aid For" IN THI	S SPACE I	s less tha	n 3, enter "3."		TOTAL DDIT. FEE			ADDIT. FEE		
	me mignest NUM	nber Previously Pa	iu rur (IDIAI O	ingepeng	ent) 15 tH8	nighest numb	er tou	no in ine app	ropnate box	in col	iumn 1.		